

HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, PACIFIC TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

N3/6
KRAFT

MORRIS

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
NIP	CELESTE		808/531-4551
MAILING ADDRESS (Street)			FAX
222 SOUTH VINEYARD STREET, SUITE 401			808/533-4601
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96813-2453	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
G.A. MORRIS, INC.			808/531-4551
MAILING ADDRESS (Street)			FAX
222 SOUTH VINEYARD STREET, SUITE 401			808/533-4601
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96813-2453	

PART II ORGANIZATION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	Telephone 916/583-9300
KRAFT FOODS GLOBAL, INC., BY ITS SERVICE COMPANY, ALTRIA CORPORATE SERVICES, INC.	
MAILING ADDRESS (Street)	FAX 916/583-9330
1415 L STREET, SUITE 1150	
(City)	(State) (Zip Code)
SACRAMENTO	CA 95814
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE 916/583-9300
DAVID TOVAR	
MAILING ADDRESS (Street)	FAX 916/583-9330
1415 L STREET, SUITE 1150	

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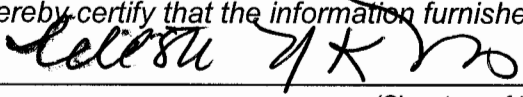
(City)	(State)	(Zip Code)
SACRAMENTO	CA	95814

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operations & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input checked="" type="checkbox"/> Other: (indicate below)
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	<u>Food Manufacturer</u>

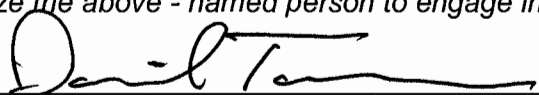
PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

 01/2/05

(Signature of Lobbyist) (Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED		
DAVID TOVAR	DISTRICT DIRECTOR, STATE GOVERNMENT AFFAIRS		
NAME OF ORGANIZATION (if applicable)		TELEPHONE 916/583-9300	
ALTRIA CORPORATE SERVICES, INC. , ON BEHALF OF KRAFT FOODS GLOBAL, INC.			
MAILING ADDRESS (Street)		FAX 916/583-9330	
1415 L STREET, SUITE 1150			
(City)	(State)	(Zip Code)	
SACRAMENTO	CA	95814	
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>			
		01/3/05	
(Signature of Authorizing Officer or Person Represented)		(Date)	